ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	A. H	12142	12/20/99
O.I.P.E. CLASSIFIER		10	1-3-00
FORMALITY REVIEW	TMB	70976	1-12-00
RESPONSE FORMALITY REVIEW	TMB	70976	3-22-00

INDEX OF CLAIMS

✓ .... Rejected		N .... Non-elected
= .... Allowed		I .... Interference
— (Through numeral)... Canceled		A .... Appeal
÷ .... Restricted		O .... Objected

Claim		Date
Final	Original	
	1	✓
	2	✓
	3	✓
	4	✓
	5	✓
	6	✓
	7	✓
	8	✓
	9	✓
	10	✓
	11	✓
	12	✓
	13	✓
	14	✓
	15	✓
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	18	✓
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	22	✓
	23	✓
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	40	✓
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	42	✓
	43	✓
	44	✓
	45	✓
	46	✓
	47	✓
	48	✓
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Claim		Date
Final	Original	
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Claim		Date
Final	Original	
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If more than 150 claims or 10 actions
staple additional sheet here

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